Request For Continued Examination (RCE) Transmittal

Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

	Application Number	10/518,038	
	Filing Date	December 13, 2005	
	First Named Inventor	Wang, et al.	
	Group Art Unit	1793	
	Conf No.	3598	
	Examiner Name	Guinever S. Gregorio	
	Attorney Docket Number	21280-0013US1	

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission r	1. Submission required under 37 C.F.R. §1.114 Note: If the RCE is proper, any previously filed unentered amendments and						
amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s)							
i. 🗆 Co	i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on						
_	ii.						
b. 🛛 Enclosed	l						
i. 🛛 Ar	mendment/Reply	iii.		Information Disclosure Statement (IDS)			
ii. 🗌 Af	fidavit(s)/Declaration(s)	iv.		Other Petition for Three-Month Extension of Time			
2. Miscellaneou	is]						
a. Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. §1.17(i) required)							
b.							
3. Fee a. ☑ The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 06-1050							
i. X RCE fee required under 37 CFR 1.17(e)							
ii. ⊠ Extension of time fee (37 CFR 1.136 and 1.17)							
iii. 🛛 Other Any deficiencies							
b. Check in	b. Check in the amount of \$ enclosed						
c. 🔲 Payment	by credit card (Form PTO-2038 enclosed)						
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED Name (Print/Type) Michael E. Cox Registration No. (Attorney/Agent) 47,505							
Name (Print/Type) Signature	Michael E. Cox /Michael E. Cox/	Date	,	Attorney/Agent) 47,505 er 16, 2009			
Signature	/Wildings L. OOX/	Date	Осренье)			
CERTIFICATE OF MAILING OR TRANSMISSION							
I hereby certify that this correspondence is being filed with the United States Patent and Trademark Office via the Electronic Filing System (EFS) on the date shown below.							
Name (Print/Type)	Dee Bacon						
Signature	/Dee Bacon/	Date	Septembe	er 16, 2009			